Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

85363 ARLO

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS					(Column 2)		I			OR 1 I	SMALL ENTITY		
			40					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS) minus 20=		*20			X\$ 9=		OR	X\$18=	360	
INDEPENDENT CLAIMS) mir	nus 3 =	* Ø			X42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT		7			+140=		OR	+280=		
* If	the difference	in column 1 is	less than zero, enter "0" in o			column 2	į	TOTAL		OR	TOTAL	1110	
	C	I AIMS AS A	MENDED - PART II					TOTAL		ION	OTHER		
		(Column 1)	(Column 2) (Column 3			(Column 3)	_	SMALL ENTITY C			OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	-	OR	X\$18=		
	Independent	*	Minus	***		=		X42≈		OR	X84=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	T CLAIM			+140=		OR	+280=		
							ı	TOTAL			TOTAL ADDIT. FEE	_	
	j	(Column 1)		· (Colur	mn 2)	(Column 3)	,	ADDIT. FEE			ADDII. FEE	·	
ENT B		CLAIMS REMAINING AFTER AMENDMENT	1. 62.5	HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**] [X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***]=]	X42≈		OR	X84≔		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						l	+140=		OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	_	_			_								
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	-	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=]	X42≈			X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		T CLAIN		┛	7,14-		OR			
*	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 									OR	+280=		
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE													
		imber Previously P nber Previously Pa					er fou	and in the app	propriate bo	x in co	olumn 1.		